Application or Docket Number

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

| CLAIMS AS FILED - PART I SMALL ENTITY OTHER THAN   |  |   |                 |             |                                  |                  |         |                   |                        |                            |                               |                        |
|--|--|---|-----------------|-------------|----------------------------------|------------------|---------|-------------------|------------------------|----------------------------|-------------------------------|------------------------|
|  |  | CLAIMS AS                                 | (Column 1)      |             | (Column 2)                       |                  |         | SMALL ENTITY TYPE |                        | OR                         | OTHER THAN<br>OR SMALL ENTITY |                        |
| TC   | TAL CLAIMS                                     |   | 34              |             |                                  |                  | R       | ATE               | FEE                    |                            | RATE                          | FEE                    |
| FOR  |  |   | NUMBER FILED    |             | NUMBER EXTRA                     |                  | BAS     | SIC FEE           | 370.00                 | OR                         | BASIC FEE                     | 740.00                 |
| ТО   | TAL CHARGEA                                    | BLE CLAIMS                                | 1 4 5 minus 20= |             | · 安24                            |                  | X       | \$ 9=             | 275,00                 | OR                         | X\$18=                        | 3 <del>78 (1</del>     |
| INE  | EPENDENT CL                                    | AIMS                                      | ł mi            | nus 3 =     | *                                |                  |         | X42=              |                        | OR                         | X84=                          |                        |
| MU   | ILTIPLE DEPEN                                  | IDENT CLAIM P                             | RESENT          |             |                                  | <b>1</b>         |         | +140= 140-02      |                        | OR                         | +280=                         | 280                    |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |                 |             |                                  |                  |         | OTAL              | 726:0                  | OR                         | TOTAL                         | , ,                    |
| CLAIMS AS AMENDED - PART II  (Column 1) (Column 2) (Column 3)  |  |   |                 |             |                                  | SMALL ENTITY     |         |                   | OR                     | OTHER THAN<br>SMALL ENTITY |                               |                        |
| Г  |  | (Column 1)<br>CLAIMS                      |                 |             | HEST                             | (Column 5)       |         |                   | ADDI-                  |                            |                               | ADDI-                  |
| A TN   |  | REMAINING<br>AFTER<br>AMENDMENT           |                 | PREVI       | MBER<br>NOUSLY<br>FOR            | PRESENT<br>EXTRA | F       | ATE               | TIONAL<br>FEE          |                            | RATE                          | TIONAL                 |
| AMENDMENT  | Total  | *   | Minus           | **          |                                  | =                | X       | \$ 9=             |                        | OR                         | X\$18≃                        | !                      |
| AME!   | Independent                                    | *   | Minus           | ***         |                                  | =                | ×       | (42=              |                        | OR                         | X84=                          |                        |
| L  | FIRST PRESE                                    | NTATION OF M                              | ULTIPLE DEI     | PENDEN      | T CLAIN                          | 1                | +       | 140=              |                        | OR                         | +280=                         |                        |
|  |  |   |                 |             |                                  |                  |         | TOTAL             |                        | OR                         | TOTAL                         |                        |
| ADDIT. FEE ADDIT. FEE ADDIT. FEE (Column 1) (Column 2) (Column 3)  |  |   |                 |             |                                  |                  |         |                   |                        | <u> </u>                   |                               |                        |
| Г  |  | CLAIMS                                    |                 |             | HEST                             | (Column 5)       |         |                   | ADDI-                  | 1                          | -                             | ADDI-                  |
| ENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |                 | PREV        | MBER<br>IOUSLY<br>D FOR          | PRESENT<br>EXTRA | F       | ATE               | TIONAL<br>FEE          |                            | RATE                          | TIONAL<br>FEE          |
| AMENDMENT  | Total  | *   | Minus           | **          |                                  | =                | X       | \$ 9=             |                        | OR                         | X\$18=                        |                        |
| AME  | Independent                                    | *   | Minus           | ***         | IT CL AIN                        | =                | \ \ \ \ | (42=              |                        | OR                         | X84=                          |                        |
| <u> </u>   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                 |             |                                  |                  | ]       | 140=              |                        | OR                         | +280=                         | :                      |
|  |  |   |                 |             |                                  |                  | ADD     | TOTAL<br>IT. FEE  |                        | OR                         | TÖTAL<br>ADDIT. FEE           |                        |
|  | (Column 1) (Column 2) (Column 3                |   |                 |             |                                  |                  |         |                   |                        |                            |                               |                        |
| AMENDMENT C  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                 | NUI<br>PREV | HEST<br>MBER<br>TIOUSLY<br>D FOR | PRESENT<br>EXTRA | F       | ATE               | ADDI-<br>TIONAL<br>FEE |                            | RATE                          | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus           | **          |                                  | =                | X       | \$ 9=             |                        | OR                         | X\$18=                        |                        |
|  | Independent                                    | *   | Minus           | ***         |                                  | =                | ]   ,   |                   |                        | OR                         | X84=                          |                        |
| $\mathbb{L}^{\!$   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |                 |             |                                  | <b>」</b> ├       |         |                   | UH                     | <u> </u>                   | <u> </u>                      |                        |
|  |  |   |                 | _           |                                  |                  | +       | 140=              |                        | OR                         | +280=                         |                        |
| * If the entry in column 1 is less than the entry in column 2 write "0" in column 3 TOTAL  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20"  ADDIT FEE  OR  TOTAL  ADDIT FEE   |  |   |                 |             |                                  |                  |         |                   |                        |                            |                               |                        |
| ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3"  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1 |  |   |                 |             |                                  |                  |         |                   |                        |                            |                               |                        |

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| CLAIMS AS FILED - PART (Column 1) |   |  |                                    |                                  |                            | mn 2)                                |               | SMALL ENTITY TYPE          |                        |          | OTHER THAN OR SMALL ENTITY |                        |
|-----------------------------------|---|--|------------------------------------|----------------------------------|----------------------------|--------------------------------------|---------------|----------------------------|------------------------|----------|----------------------------|------------------------|
| TOTAL CLAIMS                      |   |  | 34                                 |                                  |                            |                                      | F             | RATE FE                    |                        | <b>1</b> | RATE                       | FEE                    |
| FOR                               |   |  | NUMBER FILED                       |                                  | NUMBER EXTRA               |                                      | ВА            | SIC FEE                    | 370.00                 | OR       | BASIC FEE                  | 740.00                 |
| TO                                | OTAL CHARGE                               | ABLE CLAIMS  | 48 minus 20=                       |                                  | *                          |                                      | ×             | (\$ 9=                     | -                      | OR       | X\$18=                     |                        |
| IN[                               | DEPENDENT C                               | LAIMS  | / m                                | inus 3 =                         | *                          |                                      | $\rightarrow$ | <br>(42=                   |                        | OR       | X84=                       |                        |
| Μl                                | JLTIPLE DEPEN                             | NDENT CLAIM P  | RESENT                             |                                  |                            |                                      |               | 140                        |                        | 1        |                            |                        |
| *                                 | the difference                            | e in column 1 is   | less than ze                       | ero, enter                       | "0" in column 2            |                                      | L             | 140=                       | <u> </u>               | OR       | +280=                      |                        |
|                                   | С   | LAIMS AS A   | MENDE                              | ) - PAR                          | T II                       |                                      | 10            | DTAL                       |                        | OR       | TOTAL OTHER                | THAN                   |
|                                   |   | (Column 1)   |                                    | (Colur                           | mn 2)                      | (Column 3)                           | SMALL ENTITY  |                            |                        | OR       | SMALL                      |                        |
| <b>AMENDMENT A</b>                |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                    | HIGH<br>NUM<br>PREVIO<br>PAID    | BER<br>DUSLY               | PRESENT<br>EXTRA                     | R             | ATE                        | ADDI-<br>TIONAL<br>FEE |          | RATÉ                       | ADDI-<br>TIONAL<br>FEE |
|                                   | Total                                     | *  | Minus                              | **                               |                            | =                                    | ×             | \$ 9=                      |                        | OR       | X\$18=                     |                        |
|                                   | Independent                               | *  | Minus                              | ***                              |                            | =                                    | ×             | 42=                        |                        | OR       | X84=                       |                        |
|                                   | FIRST PRESE                               | ENTATION OF MI   | ULTIPLE DEI                        | PENDENT                          | CLAIM                      |                                      | +             | 140=                       |                        | OR       | +280=                      |                        |
|                                   |   |  |                                    |                                  |                            |                                      |               | TOTAL                      |                        |          | TOTAL                      |                        |
|                                   |   | (Column 1)   |                                    | (Colur                           | nn 2)                      | (Column 3)                           | ADD           | IT. FEE                    |                        | ,        | ADDIT. FEE                 |                        |
| AMENDMENT B                       |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                    | HIGH<br>NUMI<br>PREVIO<br>PAID   | BER<br>DUSLY               | PRESENT<br>EXTRA                     | R             | ATE                        | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |
|                                   | Total                                     | *  | Minus                              | **                               |                            | =                                    | X             | \$ 9=                      |                        | OR       | X\$18=                     |                        |
|                                   | Independent                               | *  | Minus                              | ***                              | CI AIA                     | =                                    | X             | 42=                        |                        | OR       | X84=                       |                        |
|                                   | FINOT PHESE                               | NTATION OF MU  | JETIPLE DEF                        | ENDENT                           | CLAIM                      |                                      | +1            | 40=                        |                        | OR       | +280=                      |                        |
| <u></u> .                         |   |  |                                    |                                  |                            |                                      |               | TOTAL<br>T. FEE            |                        |          | TOTAL                      |                        |
|                                   |   | (Column 1)   |                                    | (Colun                           | nn 2)                      | (Column 3)                           | AUUI          | ), FCE <b>b</b>            |                        | ,        | ADDIT. FEE                 |                        |
| AMENDMENT C                       |   | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT  |                                    | HIGH<br>NUME<br>PREVIC<br>PAID I | BER<br>DUSLY               | PRESENT<br>EXTRA                     | RA            | ATE                        | ADDI-<br>TIONAL<br>FEE |          | RATE                       | ADDI-<br>TIONAL<br>FEE |
|                                   | Total                                     | *  | Minus                              | **                               |                            | =                                    | XS            | S 9=                       |                        | OR       | X\$18=                     |                        |
|                                   | Independent                               | *  | Minus                              | ***                              | OL 4144                    | =                                    | X             | 12=                        |                        | OR       | X84=                       |                        |
|                                   | THIST PRESE                               | NTATION OF ML  | JETIPLE DEF                        | ENUENI                           | CLAIM                      |                                      | +1            | 40=                        |                        | OR       | +280=                      |                        |
| ***                               | If the "Highest Nui<br>If the "Highest Nu | mn 1 is less than th<br>mber Previously Pa<br>mber Previously Pa<br>aber Previously Paid | ud For" IN THIS<br>aid For" IN THI | S SPACE IS<br>S SPACE IS         | s less thar<br>s less thar | n 20. enter "20 "<br>n 3. enter "3 " | ADDI          | TÖTAL<br>T. FEE<br>the app |                        | OR ,     | TOTAL<br>ADDIT. FEE        |                        |